

County: Waukesha
TUDOR OAKS HEALTH CENTER
P.O. BOX 901

Facility ID: 8860

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HALES CORNERS 53130 Phone:(414) 529-0100
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/02): 61
Total Licensed Bed Capacity (12/31/02): 61
Number of Residents on 12/31/02: 54

Ownership: Nonprofit Church/Corporation
Highest Level License: Skilled
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 55

Services Provided to Non-Residents			Age, Sex, and Primary Diagnosis of Residents (12/31/02)				Length of Stay (12/31/02)			%
			Primary Diagnosis	%	Age Groups	%	Less Than 1 Year			
Home Health Care	No									33.3
Supp. Home Care-Personal Care	Yes						1 - 4 Years			55.6
Supp. Home Care-Household Services	Yes		Developmental Disabilities	0.0	Under 65	0.0	More Than 4 Years			11.1
Day Services	No		Mental Illness (Org./Psy)	51.9	65 - 74	1.9				-----
Respite Care	No		Mental Illness (Other)	11.1	75 - 84	29.6				100.0
Adult Day Care	No		Alcohol & Other Drug Abuse	0.0	85 - 94	48.1	*****			
Adult Day Health Care	No		Para-, Quadra-, Hemiplegic	0.0	95 & Over	20.4	Full-Time Equivalent			
Congregate Meals	Yes		Cancer	0.0		-----	Nursing Staff per 100 Residents			
Home Delivered Meals	Yes		Fractures	0.0		100.0	(12/31/02)			
Other Meals	No		Cardiovascular	1.9	65 & Over	100.0	-----			
Transportation	Yes		Cerebrovascular	9.3		-----	RNs			15.2
Referral Service	No		Diabetes	0.0	Sex	%	LPNs			3.1
Other Services	Yes		Respiratory	0.0		-----	Nursing Assistants,			
Provide Day Programming for			Other Medical Conditions	25.9	Male	27.8	Aides, & Orderlies			
Mentally Ill	No			-----	Female	72.2				
Provide Day Programming for				100.0		-----				
Developmentally Disabled	No					100.0				

Method of Reimbursement

			Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care			Total	%
			No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Resi- dents	Of All
Int. Skilled Care	0	0.0	0		0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Skilled Care	4	100.0	210		14	93.3	115		0	0.0	0	34	97.1	230	0	0.0	0	0	0.0	0	52	96.3
Intermediate	---	---	---		1	6.7	94		0	0.0	0	1	2.9	220	0	0.0	0	0	0.0	0	2	3.7
Limited Care	---	---	---		0	0.0	0		0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---		0	0.0	0		0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---		0	0.0	0		0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---		0	0.0	0		0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Traumatic Brain Inj	0	0.0	0		0	0.0	0		0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0		0	0.0	0		0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	4	100.0			15	100.0			0	0.0		35	100.0		0	0.0		0	0.0		54	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/02								

				% Needing				Total		
Percent Admissions from:		Activities of		% Assistance of		% Totally		Number of		
		Daily Living (ADL)		Independent		One Or Two Staff		Dependent		
Private Home/No Home Health		3.1	Bathing		1.9	85.2		13.0		
Private Home/With Home Health		14.1	Dressing		13.0	68.5		18.5		
Other Nursing Homes		6.3	Transferring		22.2	57.4		20.4		
Acute Care Hospitals		76.6	Toilet Use		14.8	64.8		20.4		
Psych. Hosp.-MR/DD Facilities		0.0	Eating		64.8	25.9		9.3		
Rehabilitation Hospitals		0.0	*****							54
Other Locations		0.0								54
Total Number of Admissions		64	Continence		%	Special Treatments				
Percent Discharges To:			Indwelling Or External Catheter		3.7	Receiving Respiratory Care		3.7		
Private Home/No Home Health		15.7	Occ/Freq. Incontinent of Bladder		64.8	Receiving Tracheostomy Care		0.0		
Private Home/With Home Health		25.7	Occ/Freq. Incontinent of Bowel		51.9	Receiving Suctioning		1.9		
Other Nursing Homes		1.4				Receiving Ostomy Care		1.9		
Acute Care Hospitals		11.4	Mobility			Receiving Tube Feeding		0.0		
Psych. Hosp.-MR/DD Facilities		0.0	Physically Restrained		1.9	Receiving Mechanically Altered Diets		40.7		
Rehabilitation Hospitals		0.0								
Other Locations		0.0	Skin Care			Other Resident Characteristics				
Deaths		45.7	With Pressure Sores		7.4	Have Advance Directives		100.0		
Total Number of Discharges			With Rashes		9.3	Medications				
(Including Deaths)		70				Receiving Psychoactive Drugs		55.6		

Selected Statistics: This Facility Compared to All Similar Milwaukee Metropolitan Area Facilities & Compared to All Facilities

	This Facility	Ownership: Nonprofit		Bed Size: 50-99		Licensure: Skilled		All Facilities	
	%	%	Ratio	%	Ratio	%	Ratio	%	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	90.2	85.6	1.05	86.7	1.04	84.2	1.07	85.1	1.06
Current Residents from In-County	85.2	88.1	0.97	90.3	0.94	85.3	1.00	76.6	1.11
Admissions from In-County, Still Residing	25.0	23.6	1.06	20.3	1.23	21.0	1.19	20.3	1.23
Admissions/Average Daily Census	116.4	134.2	0.87	186.6	0.62	153.9	0.76	133.4	0.87
Discharges/Average Daily Census	127.3	140.2	0.91	185.6	0.69	156.0	0.82	135.3	0.94
Discharges To Private Residence/Average Daily Census	52.7	46.8	1.13	73.5	0.72	56.3	0.94	56.6	0.93
Residents Receiving Skilled Care	96.3	90.1	1.07	94.8	1.02	91.6	1.05	86.3	1.12
Residents Aged 65 and Older	100	96.3	1.04	89.2	1.12	91.5	1.09	87.7	1.14
Title 19 (Medicaid) Funded Residents	27.8	52.8	0.53	50.4	0.55	60.8	0.46	67.5	0.41
Private Pay Funded Residents	64.8	34.8	1.86	30.4	2.13	23.4	2.77	21.0	3.08
Developmentally Disabled Residents	0.0	0.6	0.00	0.8	0.00	0.8	0.00	7.1	0.00
Mentally Ill Residents	63.0	35.2	1.79	27.0	2.33	32.8	1.92	33.3	1.89
General Medical Service Residents	25.9	23.7	1.10	27.0	0.96	23.3	1.11	20.5	1.26
Impaired ADL (Mean)	47.0	50.5	0.93	48.9	0.96	51.0	0.92	49.3	0.95
Psychological Problems	55.6	54.7	1.02	55.5	1.00	53.9	1.03	54.0	1.03
Nursing Care Required (Mean)	8.1	7.2	1.13	6.8	1.20	7.2	1.13	7.2	1.13